PART B - FEE(S) TRANSMITTAL Complete and send ogether with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000 or <u>Fax</u> INSTRUCTIONS this form that be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further details adence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7590 05/19/2004 JORDAN & HAMBURG LLP Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. 122 EAST 42ND STREET NEW YORK, NY 10168 Ruschmann (Depositor's na (Signature 17: August 2004 (Date) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/647,290 11/28/2000 Walter Muller TITLE OF INVENTION: TRANSDERMAL THERAPEUTIC SYSTEM WHICH CONTAINS A D2 AGONIST AND WHICH IS PROVIDED FOR TREATING PARKINSONISM, AND A METHOD FOR THE PRODUCTION THEREOF APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE NO nonprovisional \$1330 \$1330 08/19/2004 **EXAMINER** ART UNIT CLASS-SUBCLASS GHALI, ISIS A D 1615 424-487000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the Jordan and Hamburg LLP names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer attorneys or agents. If no name is listed, no name Number is required. will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) 1)LTS Lohmann Therapie-Systeme AG Andernach, Germany

Aderis Pharmaceuticals, Inc.

Richmond, Virginia

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☐ Corporation or other private group entity

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.

☐ Publication Fee ☐ Advance Order - # of Copies

Oxissue Fee

☐ Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 10-1250 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

Authorized Signature) C.	byH	7 Ruseh	mann	08/17, 3 <i>5</i> ,	341
NOTE; The Issue Fee and other than the applicant; a interest as shown by the receipt	Publication registered ords of the	Fee (if required) attorney or agent; United States Paten	will not be or the ass t and Trade	e accepted signee or o	from anyone ther party in e.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

08/20/2004 MMEKONE1 00000075 101250 09647290 01 FC:1501 1330.00 DA

☐ government